

UNITED STATES DISTRICT COURT

for the

Southern District of Florida



BENJAMIN WILLIAMS )

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*Plaintiff(s)*

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Civil Action No.

TRUMP MEDIA & TECHNOLOGY ( TRUTH  
SOCIAL), DONALD J TRUMP ( PRESIDENT ELECT)

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*Defendant(s)*

**SUMMONS IN A CIVIL ACTION**

To: *(Defendant's name and address)* President Elect Donald J Trump  
Mar-a-Lago  
1100 S Ocean Blvd, Palm Beach, FL 33480  
(561) 832-2600

White House  
1600 Pennsylvania Ave NW, Washington, DC 20500  
(202) 456-1111

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

*Benjamin Williams  
1343 W Washburne  
Chicago, IL 60608*

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

*CLERK OF COURT*

Date: \_\_\_\_\_

*Signature of Clerk or Deputy Clerk*

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* \_\_\_\_\_  
was received by me on *(date)* \_\_\_\_\_.

I personally served the summons on the individual at *(place)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_,  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

I returned the summons unexecuted because \_\_\_\_\_; or

Other *(specify)*: \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

*Server's signature*

\_\_\_\_\_  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Southern District of Florida



BENJAMIN WILLIAMS )

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)

*Plaintiff(s)*

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)

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v.  
TRUMP MEDIA & TECHNOLOGY ( TRUTH  
SOCIAL), DONALD J TRUMP ( PRESIDENT ELECT)

Civil Action No.

*Defendant(s)*

)

)

)

)

**SUMMONS IN A CIVIL ACTION**

To: *(Defendant's name and address)* Trump Media & Technology Group  
401 N. Cattleman Road, Sarasota FL 34232,  
300 N Cattlemen Rd, Sarasota, FL 34232  
(954) 652-4637

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

*CLERK OF COURT*

Date: \_\_\_\_\_

*Signature of Clerk or Deputy Clerk*

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

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was received by me on *(date)* \_\_\_\_\_.

I personally served the summons on the individual at *(place)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

I returned the summons unexecuted because \_\_\_\_\_; or

Other *(specify)*: \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00 \_\_\_\_\_.

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

*Server's signature*

*Printed name and title*

*Server's address*

Additional information regarding attempted service, etc:

**U.S. Department of Justice**  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

*See "Instructions for Service of Process by U.S. Marshal"*

PLAINTIFF <b>Benjamin Williams</b>	COURT CASE NUMBER
DEFENDANT <b>Trump Media Technology Group, Donald J Trump</b>	TYPE OF PROCESS

**SERVE** { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**Donald Trump**

**AT** { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
**1600 Pennsylvania Ave NW, Washington, DC 20500**

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  <b>Benjamin Williams</b> <b>1343 w Washburne Ave</b> <b>Chicago, IL 60608</b> <b>bw.campaign2018@gmail.com</b>	Number of process to be served with this Form 285
	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Signature of Attorney other Originator requesting service on behalf of:  	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
	<input type="checkbox"/> DEFENDANT	773-490-2606	1/7/2025

### SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
		No. _____	No. _____		

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served ( <i>if not shown above</i> )	Date	Time	<input type="checkbox"/> am <input type="checkbox"/> pm

Address ( <i>complete only different than shown above</i> )	Signature of U.S. Marshal or Deputy

*Costs shown on attached USMS Cost Sheet >>*

REMARKS

**U.S. Department of Justice**  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

*See "Instructions for Service of Process by U.S. Marshal"*

PLAINTIFF <b>Benjamin Williams</b>	COURT CASE NUMBER
DEFENDANT <b>Trump Media Technology Group, Donald J Trump</b>	TYPE OF PROCESS

**SERVE** { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**AT** { Department of Justice Civil Division (Donald Trump)  
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
 601 D St NW, Washington, DC 20530

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
Benjamin Williams 1343 w Washburne Ave Chicago, IL 60608 bw.campaign2018@gmail.com	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Signature of Attorney other Originator requesting service on behalf of:  	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
		773-490-2606	1/7/2025

### SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date
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Name and title of individual served ( <i>if not shown above</i> )	Date	Time	<input type="checkbox"/> am <input type="checkbox"/> pm
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Address (*complete only different than shown above*)

Signature of U.S. Marshal or Deputy

*Costs shown on attached USMS Cost Sheet >>*

REMARKS

**U.S. Department of Justice**  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

*See "Instructions for Service of Process by U.S. Marshal"*

PLAINTIFF <b>Benjamin Williams</b>	COURT CASE NUMBER
DEFENDANT <b>Trump Media Technology Group, Donald J Trump</b>	TYPE OF PROCESS
<b>SERVE</b> { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <b>Trump Media</b>	
<b>AT</b> { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <b>300 N Cattleman Road, Sarasota FL 34232</b>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	
<b>Benjamin Williams</b> <b>1343 w Washburne Ave</b> <b>Chicago, IL 60608</b> <b>bw.campaign2018@gmail.com</b>	
Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service:*)

Signature of Attorney other Originator requesting service on behalf of:  		<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
		<input type="checkbox"/> DEFENDANT	<b>773-490-2606</b>	<b>1/7/2025</b>

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. <i>(Sign only for USM 285 if more than one USM 285 is submitted)</i>					Date
Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk		

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (*See remarks below*)

Name and title of individual served ( <i>if not shown above</i> )	Date	Time	<input type="checkbox"/> am
Address ( <i>complete only different than shown above</i> )	<input type="checkbox"/> pm		
	Signature of U.S. Marshal or Deputy		

*Costs shown on attached USMS Cost Sheet >>*

REMARKS

**U.S. Department of Justice**  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

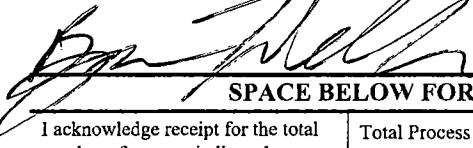
*See "Instructions for Service of Process by U.S. Marshal"*

PLAINTIFF <b>Benjamin Williams</b>	COURT CASE NUMBER
DEFENDANT <b>Trump Media Technology Group, Donald J Trump</b>	TYPE OF PROCESS

**SERVE** { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
**AT** { ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
**401 N Cattleman Road, Sarasota FL 34232**

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
<b>Benjamin Williams</b> 1343 w Washburne Ave Chicago, IL 60608 bw.campaign2018@gmail.com	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (*Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service*):

Signature of Attorney other Originator requesting service on behalf of:  	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 773-490-2606	DATE 1/7/2025
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Name and title of individual served ( <i>if not shown above</i> )	Date	Time	<input type="checkbox"/> am <input type="checkbox"/> pm
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Address ( <i>complete only different than shown above</i> )	Signature of U.S. Marshal or Deputy
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*Costs shown on attached USMS Cost Sheet >>*

REMARKS